

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>8/14/00</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>[Signature]</i>	<i>8/14/00</i>
FORMALTY REVIEW	<i>[Signature]</i>	<i>[Signature]</i>	<i>8/14/00</i>
RESPONSE FORMALTY REVIEW	<i>[Signature]</i>	<i>[Signature]</i>	<i>8/14/00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	5/17/02
2	✓	✓	5/17/02
3	✓	✓	5/17/02
4	✓	✓	5/17/02
5	✓	✓	5/17/02
6	✓	✓	5/17/02
7	✓	✓	5/17/02
8	✓	✓	5/17/02
9	✓	✓	5/17/02
10	✓	✓	5/17/02
11	✓	✓	5/17/02
12	✓	✓	5/17/02
13	✓	✓	5/17/02
14	✓	✓	5/17/02
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If more than 150 claims or 10 actions
staple additional sheet here

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